

BLOCK PARTY APPLICATION & AGREEMENT

The request must be approved by the Brandon City Council. The Council meets the 1st and 3rd Mondays of each month. Forms must be submitted to staff 6 days before the meeting to be placed on the agenda.

The undersigned representative for those requesting a BLOCK PARTY agrees to abide by the following:

BLOCK PARTY DATE: _____ BETWEEN HOURS OF _____ and _____.
* NOTE: Party MUST be off the street by 10:00 PM.

STREETS TO BE BARRICADED ARE: (Describe in Detail) _____

* NOTE: Barricades MUST be removed by 10:00 PM.

The streets affected may be barricaded, but **must allow** for necessary local and emergency traffic.

All neighbors within the barricaded street MUST SIGN BACK OF AGREEMENT.

Possession and consumption of any ALCOHOLIC BEVERAGES on any street or public place is prohibited.

Those holding the block party agree to indemnify and hold the City of Brandon, its agents and employees harmless from all liability for any acts, errors or omissions including negligent and intentional acts errors and omissions in connection therewith.

If any complaints, violations of State law, City ordinance or the above stipulations occur, the Brandon Police Department or an official of the City may terminate the Block Party at any time.

NAME of Block Party Representative DATE

ADDRESS of Block Party Representative CELL PHONE (and/or) HOME PHONE

THE CITY WILL FURNISH BARRICADES THAT CAN BE PICKED UP AT THE BRANDON CITY MAINTENANCE SHOP AT 205 EAST ELM STREET - MONDAY THRU FRIDAY BETWEEN THE HOURS OF 8 AM AND 4 PM. THE BARRICADES ARE TO BE RETURNED TO THE MAINTENANCE SHOP ON THE FIRST WORKING DAY AFTER THE BLOCK PARTY.

THE WEEK BEFORE YOUR BLOCK PARTY, PLEASE CALL THE SHOP NUMBER 582-2273 OR THE ON-CALL NUMBER 359-2641 - MONDAY THRU FRIDAY BETWEEN THE HOURS OF 8 AM AND 4 PM TO LET STAFF KNOW HOW MANY BARRICADES AND/OR TRAFFIC CONES YOU WILL NEED.

When Completed please: Mail Rep will pick up E-Mail (Address if needed: _____)

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Brandon Police Chief or Representative DATE Rec'd Copy

City Administrator or Representative DATE Rec'd Copy

Public Works Director or Representative DATE Rec'd Copy

SEE REVERSE SIDE FOR SIGNATURE LINES

